

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS356AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/24/2009
NAME OF PROVIDER OR SUPPLIER SAINT BENEDICT'S HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 3625 S. ROSEWOOD DR. LAS VEGAS, NV 89121		
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Y 000	Initial Comments The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted at your facility on 8/24/09. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division. The facility was licensed for six Residential Facility for Group beds for elderly and disabled person and/or persons with mental illness Category I residents. The census at the time of the survey was six. Six resident files were reviewed and two employee files were reviewed. Two discharged resident files were reviewed. The facility received a grade of D. The following deficiencies were identified:	Y 000		
Y 172 SS=C	449.209(2) Health and Sanitation-Outside garbage NAC 449.209 2. Containers used to store garbage outside of the facility must be kept reasonably clean and must be covered in such a manner that rodents are unable to get inside the containers. At least once each week, the containers must be emptied and the contents of the containers must be removed from the premises of the facility. This Regulation is not met as evidenced by: Based on observation on 8/24/09, the facility	Y 172		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 172	Continued From page 1 failed to ensure the 5 of 5 containers used to store garbage outside the facility were covered. Severity: 1 Scope: 3	Y 172		
Y 273 SS=D	449.2175(4) Service of Food - Special Diets NAC 449.2175 4. A resident who has been placed on a special diet by a physician or dietitian must be provided a meal that complies with the diet. The administrator of the facility shall ensure that records of any modification to the menu to accommodate for special diets prescribed by a physician or dietitian are kept on file for at least 90 days. This Regulation is not met as evidenced by: Based on observation and record review on 8/24/09, the facility failed to modify the menu for a low cholesterol, low salt, low fat diet for 1 of 6 residents (Resident #5). Employee #1 stated no residents were on special diets. The file for Resident #5 stated she is on a low cholesterol, low salt and low fat diet. The facility failed to provide a modified menu. Severity: 2 Scope: 1	Y 273		
Y 353 SS=E	449.222(3) Bathrooms and Toilet Facilities NAC 449.222 3. The bottoms of tubs and showers must have surfaces that inhibit falling and slipping. Cabinets that are attached to the floor or grab bars must be adjacent to the tubs, toilets and showers.	Y 353		

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Y 353	Continued From page 2 This Regulation is not met as evidenced by: Based on observation on 8/24/09, the facility failed to ensure 1 of 3 bathrooms (Bathroom #3 located near the laundry room) was equipped with grab bars adjacent to the tub and shower. Severity: 2 Scope: 2	Y 353		
Y 356 SS=E	449.222(6) Bathrooms and Toilet Facilities NAC 449.222 6. Bathroom doors that are equipped with locks must open with a single motion from the inside without the use of a key. If a key is required to open a lock from outside the bathroom, the key must be readily available at all times. This Regulation is not met as evidenced by: Based on observation on 8/24/09, the facility failed to ensure 1 of 3 bathroom doors (Bathroom #3 located near the laundry room) was not equipped with a two motion lock. Severity: 2 Scope: 2	Y 356		
Y 885 SS=D	449.2742(9) Medication / Destruction NAC 449.2742 9. If the medication of a resident is discontinued, the expiration date of the medication of a resident has passed, or a resident who has been discharged from the facility does not claim the medication, an employee of a residential facility shall destroy the medication, by an acceptable method of destruction, in the presence of a witness and note the destruction of the medication in the record maintained pursuant to	Y 885		

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Y 885	Continued From page 3 NAC 449.2744. Flushing contents of vials, bottles or other containers into a toilet shall be deemed to be an acceptable method of destruction of medication. This Regulation is not met as evidenced by: Based on observation and interview on 8/24/09, the facility failed to destroy medications after they were discontinued, had expired or after a resident had been transferred. The facility failed to ensure medication for Resident #7 was destroyed after she was discharged. In addition, the facility failed to provide her file. Severity: 2 Scope: 1	Y 885		
Y 908 SS=C	449.2746(2)(a)-(f) PRN Medication Record NAC 449.2746 2. A caregiver who administers medication to a resident as needed shall record the following information concerning the administration of the medication: (a) The reason for the administration. (b) The date and time of the administration; (c) The dose administered; (d) The results of the administration of the medication; (e) The initials of the caregiver; and (f) Instructions for administering the medication to the resident that reflect each current order or prescription of the resident ' s physician.	Y 908		

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Y 908	Continued From page 4 This Regulation is not met as evidenced by: Based on record review on 8/24/09, the facility failed to ensure the medication record was complete for 1 of 1 residents receiving as needed (PRN) medications (Resident #5). Resident #5 had three PRN medications given routinely. The facility failed to complete a PRN log for the three medications. Severity: 1 Scope: 3	Y 908		
Y 920 SS=F	449.2748(1) Medication Storage NAC 449.2748 1. Medication, including, without limitation, any over-the-counter medication, stored at a residential facility must be stored in a locked area that is cool and dry. The caregivers employed by the facility shall ensure that any medication or medical or diagnostic equipment that may be misused or appropriated by a resident or any other unauthorized person is protected. Medication for external use only must be kept in a locked area separate from other medications. A resident who is capable of administering medication to himself without supervision may keep his medication in his room if the medication is kept in a locked container for which the facility has been provided a key.	Y 920		

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Y 920	Continued From page 5 This Regulation is not met as evidenced by: Based on observation on 8/24/09, the facility failed to keep medications for 6 of 6 residents in a locked area (Resident #1, #2, #3, #4, #5 and #6). Pre-poured pill minder boxes were found unlocked in a drawer in the kitchen for all six residents. Severity: 2 Scope: 3	Y 920		
Y 923 SS=F	449.2748(3)(b) Medication Container NAC 449.2748 3. Medication, including, without limitation, any over-the-counter medication or dietary supplement, must be: (b) Kept in its original container until it is administered. This Regulation is not met as evidenced by: Based on observation on 8/24/09, the facility failed to keep medications belonging to 6 of 6 residents in their original container (Resident #1, #2, #3, #4, #5 and #6). Pre-poured pill minder boxes were found unlocked in the kitchen for all six residents. Interview with Employee #1 revealed she fills the pill minder containers the day before for all residents. Severity: 2 Scope: 3	Y 923		

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Y 936 SS=F	<p>449.2749(1)(e) Resident file</p> <p>NAC 449.2749</p> <p>1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he permanently leaves the facility. The file must be kept locked in a place that is resistant to fire and is protected against unauthorized use. The file must contain all records, letters, assessments, medical information and any other information related to the resident, including without limitation:</p> <p>(e) Evidence of compliance with the provisions of chapter 441A of NRS and the regulations adopted pursuant thereto.</p> <p>This Regulation is not met as evidenced by: Based on record review on 8/24/09, the facility failed to ensure 1 of 6 residents complied with NAC 441A.380 regarding tuberculosis (Resident #3) which affected all residents.</p> <p>Severity: 2 Scope: 3</p>	Y 936		

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